Notary Public

# STATE OF ALABAMA DEPARTMENT OF INSURANCE

#### ANNUAL PREMIUM TAX STATEMENT – FOREIGN PROPERTY BUSINESS

for the Year Ending December 31, \_\_\_\_\_

### INSTRUCTIONS

<u>PENALTIES</u>: Any Company failing to file its <u>Premium Tax Return</u> (even when no tax is due) or failing to pay such taxes on a timely basis shall be subject to a penalty of \$1,000 to \$10,000, to be assessed by the Commissioner. ANY COMPANY, OTHER THAN A FRATERNAL, FAILING TO ELECTRONICALLY FILE THE ANNUAL STATEMENT WITH THE NAIC ON A TIMELY BASIS SHALL BE SUBJECT TO A PENALTY OF \$250 AND MAY HAVE ITS CERTIFICATE OF AUTHORITY SUSPENDED OR REVOKED. Fraternals shall be subject to a penalty of \$100 per day for each day the Annual Statement is late.

#### RETURNS POST MARKED BY THE DUE DATE WILL BE ACCEPTED.

## Please use the following checklist to assure that all the necessary items are included with your Premium Tax Filing.

- ( ) Include two (2) forms of supporting documentation for each credit taken on reverse side.
- () The Alabama Facilities Credit Worksheet must accompany this Return if paying at a rate less than the 3.6% maximum.
- () Make checks payable to the: Alabama Department of Insurance. WE DO NOT HAVE AN EFT ACCOUNT AT THIS TIME.
- () Please submit TWO CHECKS: one in payment of Fees, and one in payment of Premium Taxes due the State of Alabama.
- ( ) Please mail the following documents to the address below: Annual Premium Tax Returns, Checks, and the Application for License Renewal. **These items should be mailed together.**

### POSTAL SERVICE

My commission expires

Alabama Department of Insurance c/o Compass Bank P. O. Box 830691 Birmingham, AL 35283-0691

### **COURIER OR EXPRESS SERVICE**

Alabama Department of Insurance c/o Compass Bank 701 South 32<sup>nd</sup> Street Birmingham, AL 35233

NAIC#	Name of Company		
Company's Mailing Address			
Preparer's Name and Title (Print)	Telephone Number	E-Mail Address	
(Pay License	Renewal Fees on Casualty Re	eturn PF-Y only <u>)</u>	
tate of	County of		
	, President and		Secretary
of the being duly sworn, each for himself, deposes a coregoing statement of business transacted duri and correct according to the best of their inform	and says, that they are the above ing such year and showing the true	described officers of said Comp status of same on December 31,	
subscribed & sworn before me this			President
Day of, 20	_,		Secretary

# STATE OF ALABAMA DEPARTMENT OF INSURANCE

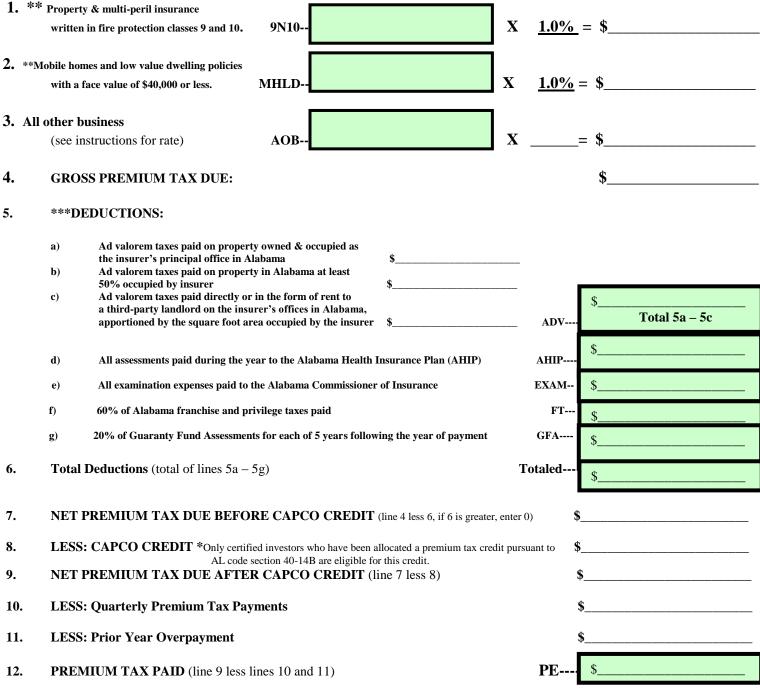
PE-Y NAIC#\_\_\_\_

### ANNUAL PREMIUM TAX STATEMENT – FOREIGN PROPERTY BUSINESS

for the Year Ending December 31, \_\_\_\_\_

PREMIUMS less DIVIDENDS & RETURNS

NAME OF COMPANY	
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<sup>\*\*</sup>Line items 1 and 2 require supporting documentation. A *policy run*, which can be obtained from the Company's underwriting unit will suffice as documentation.

<sup>\*\*\*</sup> Lines 5a – 5g require *two* forms of documentation. If documentation is not included, the deduction will not be allowed. *All documentation must include a canceled check or verification of an EFT payment*. The second form of documentation may include a bill, an assessment, or a tax return.